								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD								1					
Effective October 1, 2000								09882046.					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	YTTIY	OR	OTHER SMALL I		
TOTAL CLAIMS								RATE	FEE		RATE	FEE	
FOR			NUMBER F	ILED	NUMBER EXTRA			BASIC FEE	365.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			41 min	us 20=	. 51		-	X\$ 9=	189	OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =			× ×		x46=	42	OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT					+135=		OR	+270=		
• If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL	601	OR	TOTAL		
CLAIMS AS AMENDED - PART II										OTHER			
	r	(Column 1)		(Colu		(Column 3)		SMALL		OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 48	Minus	4		- 7		X\$,8€	175.00	OR	¥\$ 10 =	TO STATE OF THE PARTY OF THE PA	
	Independent	• 5	Minus	•••	4	=		100.0	100.00	OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=		
11 10 6								TOTAL	275,00	OR	TOTAL		
	11/1	(0-1		(Cabu	0\	(O-h 0)	. •	ADDIT. FEE	以();	OR.	ADDIT. FEE	-	
_		(Column 1) CLAIMS		HIGH	mn 2)	(Column 3)	1 1		4001	1		400)	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.45	Minus	4	\mathcal{P}	-		X\$ 9=		OR	X\$18=		
	Independent	.5	Minus	•••	5	<u> </u>		X40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS		HIGH	IEST IBER		1		ADDI-			ADDI-	
		REMAINING AFTER AMENDMENT		PREVI	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	••		8		X\$ 9=		OR	X\$18=		
	Independent	<u> </u>	Minus	***		-		X40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.										OR	TOTAL		
•	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, onter "20." ADDIT. FEE												
	The "Highest Nun	nber Previously Pa	ld For (Total o	Independ	tent) is th	e highest numbe	er fot	qs enti ni bnu	propriate bo	x in co	Rumo 1.		

FORM PTO-475 (Rev. 8/00) BEST AVAIL ABLEPGOPHERMAN OFFICE, U.S. DEPARTMENT OF COMMERCE

AVAN, ASELE PROPORTINGENERA OFFICE, U.S. DEPARTMENT OF COMM